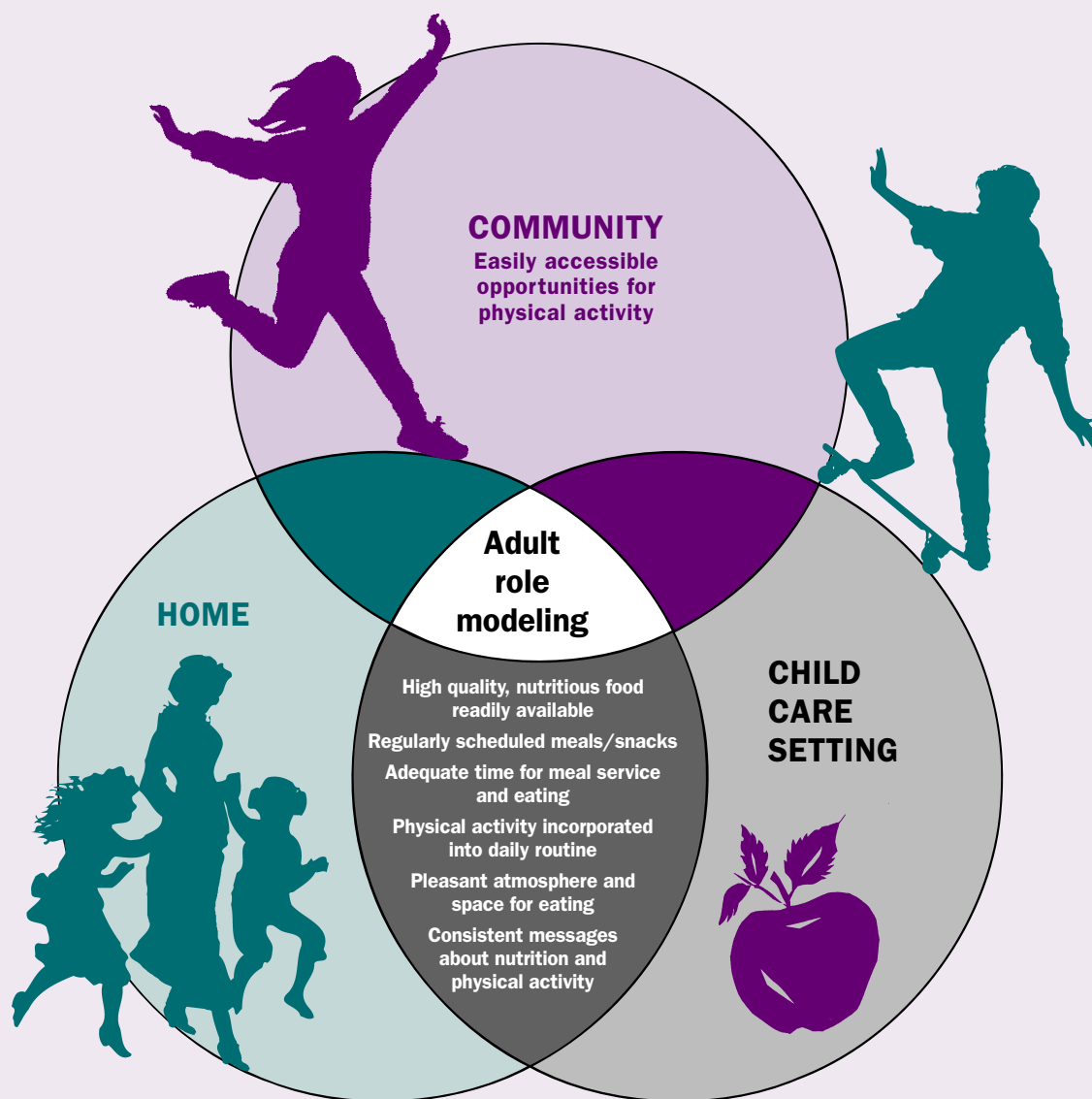


# Child Nutrition

CACFP EDITION

April, 2002 / Vol. 2, No. 2

## Rating the Nutrition Environment



The physical activity and eating habits of children are influenced by their entire environment, not just what goes on during mealtime. Successful improvement of the nutrition environment results from many people planning together, working together, and taking shared responsibility for the outcomes.

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## ► From the Director's Desk

### The Heart of the Matter

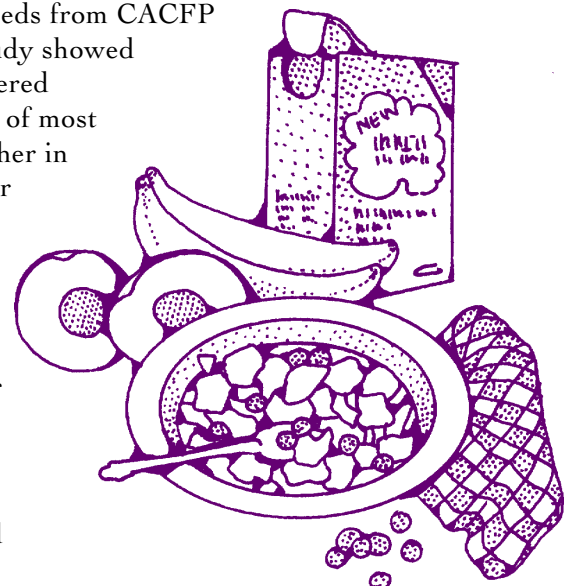
It had been a hectic morning, the day care center director told me as I arrived to do a review of the food program. It was a small center with just the director and one assistant on the staff. It was the director's turn to make lunch, but she had been distracted by some behavior problems, by a call from a parent about her child's medicine and by a balky furnace that needed her attention. She was late getting the lunch on the table. The children were sitting at their places, still in good humor as they waited for their plates. The youngest children were fed first. I couldn't help but be charmed by one little fellow in a high chair who was doing his best to feed himself as the plates were passed to the children at the table. As the mealtime wore on and began to encroach into what was his usual naptime, the child in the highchair seemed to lose interest in his plate. His head wobbled and his eyes lost focus as sleepiness replaced hunger. Before I could speak, he gently let his head fall forward and was deeply asleep as his forehead landed in the mashed potatoes.

There are many aspects to a healthy nutrition environment for young children. Meal timing, of course, is one of the critical factors but there are a host of other considerations as well. However, of all the components of a healthy nutrition environment, the real heart of the matter is two critical questions:

- *Do children eat a healthy diet while they are in your care?*
- *Are children learning and practicing healthy eating behaviors that will stand them in good stead over a lifetime?*

The importance of these questions was evident in a study conducted in 1995 by USDA to evaluate the nutritional value of meals and snacks served in the Child and Adult Care Food Program. They found that children in day care on a full time basis consume about half of their daily calorie needs from CACFP meals and snacks. Overall, the study showed that breakfasts and lunches as offered contain more than the target level of most nutrients. Lunch tended to be higher in fat than the Dietary Guidelines for Americans recommend.

When the breakfast meals that were offered were compared to what children actually ate, it was found that children consumed about three-quarters of the meal. While the target is to have breakfast contribute one-fourth of the day's nutrients, the study found that intakes exceeded



that for protein, Vitamin A and Vitamin C, but did not achieve that level for calories and iron.

Lunches consumed by children provided the target amount for calcium and Vitamin C and more than the target for protein and Vitamin A. Again, calories and iron were lower than the target levels of one-third of the day's required amounts. More of a problem, at an average of 35%, the percent of calories from fat in the lunches consumed was more than the recommended limit of 30%. Similarly, the percent of calories that came from saturated fat was 15% while the recommended limit is 10%. These findings indicate that at an early age children may be developing expectations about the fat content of meals that will contribute to overweight and health problems in the future. This is one part of the nutrition environment that needs to be addressed and that care givers have control over.

When the researchers looked at the nutrition knowledge and practices of the food preparers, they found that most were familiar with many strategies for implementing the Dietary Guidelines. Food preparers were most knowledgeable about ways to decrease sodium and least knowledgeable about ways to increase the carbohydrate content of day care meals. This is an important skill in order to address the need to increase calories while cutting the fat content of the meals.

When describing purchasing considerations, many program staff talked about limiting sugar in the foods they choose, but not as much attention was paid to the fat content of the purchases. The study identified some common differences between centers that met the Dietary Guidelines goal of no more than 30% of calories from fat and those that exceeded the limit.

A comparison of providers who exceeded the 30% target to the providers who met the target showed that those providers who kept fat content within the limit did the following:

- offered more 1% and skim milk,
- offered more fruit on a daily basis
- included rice in the menu more often
- served these foods less often: whole milk, french fries and other processed potatoes, breaded or processed meats and poultry, regular ground meat, regular hotdogs, and high-fat condiments such as sour cream, regular salad dressings, and butter.

As we continue our conversation in these newsletters about improving the nutrition environment, we will explore the many environmental conditions that encourage children to eat nutritious meals and to practice healthy eating behaviors. Your first step along this path could be a rigorous evaluation of the menus you offer and the food preparation techniques you use. Reducing the fat in menus while keeping the calorie level high enough is a good place to start.

*– Jo Busha, State Director*



## ► *Teaming up for Action*

**T**eaching and modeling healthy behaviors among children is vital in the early years of development if we want young people to acquire the knowledge and skills to become healthy and productive adults. By promoting and supporting healthy behaviors, day care centers and homes can support and improve children's capacity to learn, reduce absences, and improve physical fitness and mental alertness.

### Even The Lone Ranger Had Tonto!

When it comes to making a significant difference in a complex environment, teamwork beats working alone, hands down! And the "big nutrition picture" for children is certainly a complex environment. Changes and improvements are more likely to occur when interested, informed persons join forces than if efforts are fragmented as individuals try to find the time, the energy, and other resources to tackle the job. Partnerships multiply the impact of individuals.

There is no magic formula for the perfect team. The important thing is to include people who have a stake in the health of children: parents, grandparents, caregivers, health care professionals, chefs, and even business men or women. Actually, anyone who is interested in health, children, or nutrition and food is a potential partner. All partners bring their own perspectives, their own set of resources, their own potential for motivating others, and unique skills and abilities to effect positive change.

"How do I start?" you ask. A first step is to invite likely members to an exploratory meeting and discuss current child health statistics (see Volume 2, Issue 1, in this series of newsletters) and how this information relates to the children in your care. There are reproducible masters in the "Support Materials" booklet in the *Changing the Scene* kit that can be used to highlight some of these points. Other information in the kit may also be appropriate for adapting to meet the needs of child care settings.

### Possible Topics for Assessment

- The child care's commitment to nutrition and physical activity
- Quality meals and snacks
- Other healthy food options
- Pleasant eating experiences
- Nutrition education
- Community options for physical activity
- Parent commitment to nutrition and physical activity



### The Assessment Phase

To work together as an effective team there must be a clear picture of the team's goals. However, before goals can be developed, it is important to know the strong points of the current nutrition environment and the areas that need improvement. Several evaluation tools are available for conducting an assessment of the school nutrition environment. These tools can provide ideas for evaluating the nutrition environment for child care situations. One is the "School Health Index for Physical Activity and Healthy Eating" that was developed by the Centers for Disease Control and Prevention, Division of Adolescent and School Health. The other is the "Improvement Checklist" included in the kit *Changing the Scene*. Keep in mind that the ultimate goal is to get the desired information.

For more information on each of these resources, refer to page 5.

While developing a team and working as a team is crucial for effective change, it is not a simple process. Being a team member requires openness to new ideas, willingness to hear and respect each person's suggestions, and acceptance of responsibility for participating and taking on

some of the work. Team members can educate themselves and each other about the current situation, about model programs and practices, about possible new approaches, and regulations or restraints that affect what can and cannot be done. Armed with this knowledge the team can formulate strategies for addressing the key concerns and can implement creative approaches that will make a real difference in children's behaviors related to eating and physical activity.

## The Action Plan

**1. Analyze and interpret data.** The information gathered from the assessments provide the foundation for plans to improve the nutrition environ-

ment. It is important to share the assessment results with all team members and discuss what the results mean. This is a critical step because the findings provide the basis for goals and activities, as well as the standards against which progress will be measured.

**2. Determine priorities and develop goals and activities accordingly.** In an ideal world, the team would have the resources needed to make all the desired changes. However, in the real world, resources are limited. To help assure progress and success, decide what is most important and set goals and develop activities to start working to make those changes. Working on too many priorities at one time can be overwhelming and set the team up for failure.

## Helpful Resources

***Changing the Scene*** is a kit that was developed by the United States Department of Agriculture (USDA), Food and Nutrition Service in collaboration with a number of professional organizations and government entities. Kit components include:

- “Guide to Local Action”
- Support materials (including improvement checklist, handouts, sample letters, meeting notice, press release, and articles)
- Resources from collaborating organizations (including the chapter “Policies to Encourage Healthy Eating,” from *Fit, Healthy, and Ready to Learn: A School Health Policy Guide*)
- Power Point presentation with script and transparencies
- Video
- Brochures
- CD-ROM with many of the kit materials for printing or downloading for the purpose of modifying for local use

To obtain a copy of the ***Changing the Scene*** kit (while supplies last), visit the Team Nutrition Home Page: <http://www.fns.usda.gov/tn> to download or e-mail an order form. If more than one person from the same organization requests a kit, your name and phone number may be shared with other interested people from that organization.

***A Self-Assessment and Planning Guide*** is a self assessment and planning tool that can help to evaluate health promotion policies and programs and take steps to improving them. Although this was designed for schools, it can provide ideas for day care facilities. There is an elementary school version as well as a middle/high school version.

To obtain a copy of the ***School Health Index***, download from <http://www.cdc.gov/nccdphp/dash> or request by phone at 1-770-488-3168.



**3. Write the plan.** Develop a timeline and plans that focus efforts and resources on realistic activities that will lead to changes that will benefit everyone. When building your plan, look at the total pool of resources—time, money, commitment, skills, ability, knowledge, creativity, and so on—available for your use. Maximize the resources you can bring to bear to achieve the goals of your action plan.

Additional tasks include establishing time frames and determining who will be responsible for doing what. Each team member may have his or her own priority or area of expertise. This helps in dividing up the work that is to be done. Setting times for reviewing successes and resolving problems are essential to the plan. Also, to keep the team on track, there needs to be a method for evaluating progress and making adjustments in the plan due to changes in priorities or resources.



**4. Implement the plan.** It should go without saying that nothing gets accomplished if the plan is not put into action. But many of the best-laid plans falter because less time and effort is put into acting on the plans than was spent on developing the plans!

Be prepared for the unexpected. And expect to make minor or major revisions to your overall plan as implementation takes place. Things can go wrong even with well-developed plans, so it is important to monitor progress and make adjustments as needed. Some problems can be anticipated and contingencies developed within the overall plan. To help develop contingency plans, engage in some “what if” thinking at the start of the planning process.

## Communication

Open communication is critical to effective teamwork. Sharing information with one another on a regular, ongoing basis makes it easier to adjust or revise the overall plan or specific parts of the plan. People need to know of changes in expectations and ways the plan may have been updated. To keep lines of communication open, schedule regular “working sessions” to chart progress and to plan activities. Keep meeting minutes and distribute to all team members.

Think about letting others in the community know about the team’s activities. Invite them to participate as often as possible. This can help you win support for your goals, gain recognition for your day care, and encourage others to join the team or contribute expertise or even tangible resources to the effort. Newsletters and media outlets are some different ways to keep the community informed.

Change is often difficult for individuals and organizations because change implies that something is broken and no one wants to be considered part of a problem. It is important to help people see change as a commitment to success. Keep the lines of communication open and the focus of discussions on the goal. Remember, it is the children’s health that is at stake!

## References

*Changing the Scene Kit, Improving the School Nutrition Environment*, Team Nutrition, Food and Nutrition Service, US Department of Agriculture.

*Equity & Excellence: An Action Planning Guide*, Vermont Department of Education, School Improvement Team.

*Reverse the Trends: Create a Healthy School Nutrition Environment for Students*, A Publication of the Child Nutrition Unit, Arkansas Department of Education.

*School Health Index: A Self-Assessment and Planning Guide*, Division of Adolescent and School Health, Centers for Disease Control and Prevention



# ➤ Program Improvement Ideas

## Investing in the Future

**O**ne of the challenges faced by child care providers is often planning menus and preparing and serving foods that children enjoy and are also healthy. As a nation, our eating habits have changed, and not always for the better. Children like different foods than they did years ago. Parents have different expectations and some are not shy about offering comments. Not to mention all the directives from USDA passed along by the state consultants! Do you have a plan for keeping up with new nutrition knowledge as it relates to child development? Becoming familiar with best practices for feeding children? Learning new skills?

When program practices and employee skills are not improving, there is always the risk that the children will not be supported with the nutrition they need for growth and development. Attitudes about food and eating are picked up from adults. Rather than operate in a vacuum or avoid responsibility for appropriate role modeling, child care staff need to keep in mind the famous slogan of the 1960s, “If you are not part of the solution, you are part of the problem.”

## Professional Development

There are a number of steps child care staff can take to become part of the solution:

- 1. Recognize that professional development is critical to the continued health and success of the child care operation.** No one is immune from the need to upgrade their knowledge, improve their skills, or learn new techniques and ideas. Teachers have professional development plans to assure that they continue to improve in their field. For the same reason, the child care staff needs to have a plan for their professional development.
- 2. Address the issue of professional development.** If there is no plan for professional development, one should be started. Each staff member should be included. Seek support and input from your sponsor. They may have expectations or suggestions that can be included.

- 3. Seek out appropriate professional development activities.** Child Nutrition Programs also offers a number of training sessions, workshops, and a conferences appropriate for those working in the child and adult care program. These are announced in the Calendar of Events in each newsletter as well as in separate notices or brochures for each individual event. In addition, sponsors must offer training on a regular basis. College level courses and adult education and/or vocational school classes may also provide information and training that will improve knowledge and skills.

- 4. Develop your own training sessions when appropriate.** Child Nutrition Programs has many training resources we are happy to loan to day cares wishing to conduct training sessions. Many of these resources are self-guided video and workbook sessions.

## What’s Your Attitude?

Among child care providers and staff, there are those who embrace opportunities for learning with open arms. They network and attend classes and read professional publications. Even if a course isn’t quite what they expected, they think about how they might use the information presented in their particular situation and learn from it anyway.

At the other end of the spectrum are those who don’t read newsletters or work-related publications, toss training announcements into the recycle bin, and resist input from any source. They put a lot of effort into maintaining the status quo—not wanting anyone or anything to impact what they have been doing for months (or years).

Of course, there are many reasons why not everyone can participate in all the professional development activities that are available, or institute sweeping changes in their programs—it’s called real life. But that is not permission to wear blinders and do nothing to contribute to personal or program growth. Get in the habit of working with and learning from others, seeking out opportunities for personal and professional growth, maintaining a positive outlook, and seeking creative solutions to problems and issues. Both you and your Program will reap the benefits.

## ► Program Information

### Family Style Meal Service

In a recent administrative review, I was asked about using family style meal service for their toddlers and preschoolers. In family style meal service, containers of food are placed on the table and children serve themselves and pass the containers around the table to other children.

### Two-Year-Olds

At 2 years of age, children are entering the phase sometimes called the “terrible twos.” Two-year olds can be a handful sometimes due to their high energy level and because they are developing so many skills—including walking, running, and eye-hand coordination. Children at this stage are curious and want to do things for themselves. A flexible schedule and a safe environment for them to explore works well for this age group.

Fully implementing family style meal service may be appropriate for some 2-year olds; however, many early twos are not ready for this task and still need to be served their meals in high chairs. Serving dishes may be placed within their sight so that they can observe food being served from the bowls or plates onto their plates.

With imitation as a major method of learning, it is important to place high chairs near tables with adult caregivers and older children who are also participating in the meal and modeling positive eating behaviors. Meals and snacks may be pre-plated with foods cut into appropriate sizes. All food items should be served at once so that each child may freely choose from the selection of food items offered. While not every meal will be a calm and pleasurable experience, it is important to be consistent and establish a routine for mealtime.

While 2-year-olds are no longer drinking from a bottle, they still use sucking, mouthing, and tasting to explore their world. Cups with covers can help in the transition from bottles to regular cups. This enables them to drink their beverage and gives them practice with their hand-eye coordination, and lifting and tipping skills.

### Feeding Toddlers

**1.** At two years of age, physical growth begins to slow down a bit, and the child’s appetite may begin to decrease. This often causes parents and caregivers to be unnecessarily concerned that toddlers are not eating enough or are not eating enough of the “right” foods. While a decrease in appetite is common at this age, if a toddler’s weight does not seem normal, ask the parents to check with the doctor to be sure that the child is in good health.

**2.** Children learn to hold and drink from a cup and will quit eating when they are full. Healthy toddlers will decide which foods and how much of the foods offered they will eat. They may enjoy one food for a few weeks, and then refuse it.

**3.** Definite food preferences begin to be established. Toddlers prefer lukewarm foods over very hot or cold foods. They usually do not like highly seasoned foods, but enjoy sweet-tasting foods, such as fruit.



### Three-Year-Olds

At three years old and through the preschool years, teeth have come in, and teething pain and chewing on things are seldom problems. Eye-hand coordination becomes more refined and some motor skills are more controlled. Children at this age can use a fork or spoon with more control and direction.

Implementing family style eating may begin in earnest at this age. Family style meals allow children to choose the amount of food they want to have on their plate. Be sure to use serving bowls or containers that are small and manageable for small



hands. Use serving utensils that are different from the silverware that the children use to eat with. This will help them to differentiate between their own silverware and the serving utensils. This can result in reduced likelihood of eating food with the serving utensil.

Milk pitchers should be easy to handle and pour from. You may want to start by using one with a cover that limits the amount of liquid that pours out. Serving themselves gives children time to practice skills like passing, pouring, and scooping foods. Taking turns, sharing, and politely turning down foods are all a part of the table manners children learn by participating in family-style meal service.

## Gentle Reminders

Children of all ages will try new foods if offered in a pleasant, appealing manner. Be sure to offer new foods frequently. Young children may need to see a new food offered 6 to 12 times before they will decide to like it. Once children have accepted a food, continue to offer it so the food will remain familiar. Let children know they do not have to eat foods they do not want. This attitude will help children feel comfortable when trying new foods.

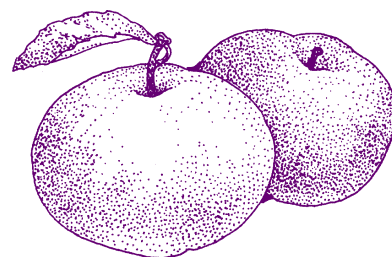
Children know how much they need to eat, parents and child care providers are the “gatekeepers” who decide which foods to offer and when meals and snacks will be served. If nutritious foods are served, children can’t go wrong in what they choose to eat. Offering children nutritious and appropriate foods helps them get the nutrients and energy they need. It also sets a good example, starting at a very young age. Good foods to try include fresh fruits and vegetables; breads, crackers, low-sugar cereals, pasta, potatoes, rice, tortillas, and cooked grains; meats, poultry and fish; dairy products including milk, eggs, yogurt and cheese; beans and peas; and foods with small amounts of spices and herbs.

Although it seems an easy way to give children “fruit,” avoid serving large amounts of juice, especially between meals. Too much juice can fill up the child and make him or her not want to eat the foods offered at meals or snack time. In addition, many juices are high in sugar resulting in unneeded extra calories, especially when it is given instead of water. Excess juice can also cause gastrointestinal problems in children.

## Feeding Preschoolers

1. Preschoolers’ eating habits may be erratic. They may be too busy and active to want to sit and eat. Their rate of growth is slowing down, so they may eat less food. They may simply talk throughout the entire meal.
2. At this age, it is important for adults to eat meals with the children and to model proper mealtime behavior, positive eating behaviors, and manners.
3. Preschoolers are establishing their food preferences. They know what they like and don’t like. Be sure to pave the way for good habits in the future by providing healthy meals and snacks.
4. They may enjoy learning about food. There are many ways to spark children’s interest in food. Some suggestions:
  - Discuss different foods with children.
  - Mix nutrition information in with reading, story telling, and other activities.
  - Allow children to have input on what is served.
  - With proper supervision, let children help prepare various items for a meal.

Sweets are another category of food that needs to be limited. Cookies, cakes, ice cream and other foods with added sugar should be only special occasion items. You can lessen a child’s sweet tooth by keeping high-sugar items to a minimum and storing any special treats out of sight. What children cannot see they are less likely to ask for. Keep in mind that although fruits naturally contain sugar, they also provide a wide variety of other important nutrients. Children should be encouraged to try and eat a variety of fruits.



## ➤ **Frequently Asked Questions**

**Q** *In a recent administrative review, I was asked what my policy was regarding receiving discrimination complaints in CACFP. What is this all about and do I really need to have a policy?*

**A** The Civil Rights regulations for Child Nutrition Programs require facilities to meet certain requirements in this area, including having a formal procedure in place to receive complaints alleging discrimination by the Program. Each institution must develop a procedure and put it in writing. The procedure must then be followed if the institution receives a discrimination complaint in CACFP. If you have a policy and formal procedure in place for dealing with any kind of discrimination, check to see if it specifies certain types. If it is general, then it probably covers procedures for dealing with discrimination specifically related to CACFP.

Other Civil Rights requirements include: allowing equal access and admission to the food program; making information regarding CACFP available to the public upon request, in the appropriate translation; collecting and reporting racial/ethnic data for participants enrolled in the program annually on the program renewal or application; and displaying the Civil Rights poster with the non-discrimination statement. Institutions are no longer required to publicly announce their participation in the program through the media; the State Agency now publishes the press release annually for programs that participate in CACFP.

The program reviewer will ask these questions and check to make sure the Civil Rights and the “Building for the Future” posters are on display.

**Q** *I was also asked if materials that I provide to parents explaining CACFP contain the nondiscrimination statement. What do I have to do to meet this requirement?*

**A** Any materials about CACFP given out to parents or the public must contain the following nondiscrimination statement as required by USDA.

In accordance with federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. (Not all prohibited bases apply to all programs.)

To file a complaint of discrimination write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call (202)720-5964 (voice and TDD). USDA is an equal opportunity employer.

The cover letter that accompanies the Income Eligibility Form when it is given to parents is an example. The cover letter describes the Child & Adult Care Food Program, why the income information is being collected, and includes the non-discrimination statement and address for USDA to which complaints may be sent. Another example is the “Building for the Future” poster which informs parents of the benefits of the program as well as the required nondiscrimination statement.

**Q** *What is a “CN Label”?*

**A** The Child Nutrition Labeling program requires an evaluation of a product’s formulation by the Food & Nutrition Service to determine its contribution toward meal pattern requirements. It allows manufacturers to state this contribution on their labels. The program provides a warranty to purchasers of CN-labeled products. Main dish products that contribute to the Meat/Meat alternate component are eligible for CN Labels. Some fish and chicken nuggets purchased from wholesalers will contain the CN Label. This label will have the contribution to the meal pattern based on the stated portion size. For example, the CN label for brand ZZ Chicken Nuggets may state that “5 chicken nuggets when cooked is the equivalent of 2 ounces of meat/meat alternate and 1 \_ grain/bread servings.” In this example, the chicken nuggets will meet both the meat/meat alternate and grain/bread component requirements for the meal. Ask your wholesaler about CN products. CN labels are not found on products purchased at the retail level.

## ► Bulletin Board

### Food For Thought...

"If you think American business struggles to control health care costs now, just wait a few years, when today's cholesterol-clogged, overweight adolescents join the work force."

– Art Popham, Syndicated Columnist

### A time saving tip:

For centers/programs using cycle menus, complete a weekly meal record filling in the menu section with the menus that will be served each day during the menu cycle. It is recommended that menus be at least a five-week cycle. Under each of the components, record the names of the food items that will be served and leave a blank line in front of each food item. Make copies of the meal records. On the day that the menu is served, record the numbers of children/adult participants served in the appropriate box and indicate the amounts of each of the food items prepared. Be sure to record the food amounts served as this is the documentation of the center's/program's compliance with the meal pattern. Any changes or substitutions should also be noted on the meal record.



### We Need YOUR Help!

Do you have items appropriate for the bulletin board? A newspaper clipping about your program? A promotional idea? Food service equipment for sale? Food service equipment you are looking for? An award or recognition given to a food service employee? A favorite menu?

Please don't be shy! Your colleagues out there are hungry for information about other food service personnel and programs. Contact Helen Ballard (see page 2 for phone, fax, e-mail, snail mail) and she will take it from there.

### Child Care Program Materials Brochure

The National Food Service Management Institute has a brochure that describes materials and services that help promote the continuous improvement of Child Care Programs. Includes links to materials that are available on the Web. Go to <http://www.nfsmi.org/Information/Guide.html>, then click on "Child Care Program Materials Brochure."

## ► *Calendar of Events*

### **May 2, 2002**

#### **CACFP & SFSP Annual Conference: Moving in the Right Direction**

9:30 a.m. – 3:30 p.m.

Killington Grand Hotel and Conference Center, Killington

*Sponsored by VT Department of Education, Child Nutrition Programs*

### **June 2, 2002**

#### **Quarterly New CACFP Sponsor Training**

9:30 a.m. – 3:30 p.m.

Central Vermont Medical Center, Berlin

*Sponsored by VT Department of Education, Child Nutrition Programs*

### **August 19-23, 2002**

#### **Summer Institute**

Location to be announced

*Sponsored by VT Department of Education, Child Nutrition Programs*

### **August 21, 2002**

#### **Quarterly New CACFP Sponsor Training**

9:30 a.m. – 3:30 p.m.

Central Vermont Medical Center, Berlin

*Sponsored by VT Department of Education, Child Nutrition Programs*

### **October 24-25, 2002**

#### **School Food Service Annual Fall Conference**

Killington Grand Hotel and Conference Center Killington

*Sponsored by VT Department of Education and Vermont*

*School Food Service Association*

**April, 2002, Vol. 2, Issue 2**

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